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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)											
	Michael G. Fitzpatrick	Charlest address about and					O Condid	ata'a FFO	ا ما ما ما ا	ation Ni		
	(b) Address (number and street) PO Box 308	□ Check if address changed			Candidate's FEC Identification Number H4PA08074							
	(c) City, State, and ZIP Code						3. Is Th		New		\ \ \	Amended
	Langhorne		P	A 19	9047-0		State		(N)	OR	×	(A)
4.	Party Affiliation	5. Office Soug	ht		6.	State & Dist		date				
	REPUBLICAN PARTY	House				PA	80					
	DE	SIGNATIO	N OF PR	RINCIP	AL C	AMPAIGN	COMM	ITTEE				
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s). (year of election)											
	NOTE: This designation should be filed with the appropriate office listed in the instructions.											
	(a) Name of Committee (in full)											
	Fitzpatrick for Cong	ress										
	(b) Address (number and street) PO Box 185											
	(c) City, State, and ZIP Code											
	Langhorne					PA	1904	7-0185				
8.	I hereby authorize the following nancandidacy. NOTE: This designation should be f	ned committee,	which is NC	OT my prir	ncipal c	epresentativ	,	eceive and	expend	d funds	on beh	alf of my
	(a) Name of Committee (in full)											
	Leadership for SEP	A										
	(b) Address (number and street) 50 South Providence Road											
	(c) City, State, and ZIP Code											
	Media					PA	1906	3				
	I certify that I have exa	mined this Stat	ement and t	o the bes	t of my	knowledge a	and belief it i	s true, corr	ect and	comple	ete.	
Si	gnature of Candidate						Date					
M	lichael G. Fitzpatrick			[]	Electron	nically Filed]	04/12/20)12				
N	OTE: Submission of false, erroneous	or incomplete	information	may subje	ect the	person signir	ng this State	ment to pe	nalties	of 2 U.S	s.C. §43	37g.
		1										

FEC FORM 2 (REV. 02/2009)

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)				Page 2 /
DESIGNA	TION OF OTHER AU			[ADDITIONAL]
I hereby authorize the following named committee, w candidacy.	which is NOT my principal cam	paign committee, to	receive and expend funds of	on behalf of my
NOTE:This designation should be filed with	n the principal campaign co	ommittee.		
(a) Name of Committee (in full)				
Team 2012				
(b) Address (number and street) 228 South Washington Street Suite 115				
(c) City, State and ZIP Code				
Alexandria		VA	22314-5404	
DESIGNA	ATION OF OTHER AU			[ADDITIONAL]
I hereby authorize the following named committee, v candidacy.	which is NOT my principal can	npaign committee, to	receive and expend funds	on behalf of my
NOTE:This designation should be filed with	h the principal campaign co	ommittee.		
(a) Name of Committee (in full)				
Patriot Day 2011				
(b) Address (number and street) 228 South Washington Street Suite 115				
(c) City, State and ZIP Code				
Alexandria		VA	22314-5404	
DESIGNA	ATION OF OTHER AU			[ADDITIONAL]
I hereby authorize the following named committee, v candidacy.	which is NOT my principal can	npaign committee, to	receive and expend funds	on behalf of my
NOTE: This designation should be filed with	h the principal campaign co	ommittee.		
(a) Name of Committee (in full)				
Freshman Class JFC				
(b) Address (number and street) 228 South Washington Street Suite 115				
(c) City, State and ZIP Code				
Alexandria		VA	22314	

(c) City, State and ZIP Code

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) PA + 5 Committee (b) Address (number and street) 7315 Wisconsin Avenue Suite 310 East (c) City, State and ZIP Code MD Bethesda 20814-3202 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street)